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CONFIRMATION NO. 6756

SERIAL NUMBER 09/987,226	FILING OR 371(c) DATE 11/14/2001 RULE	CLASS 705	GROUP ART UNIT 3626	ATTORNEY DOCKET NO. RJ371
APPLICANTS Raymond Anthony Joao, Yonkers, NY;				
** CONTINUING DATA ***** This appln claims benefit of 60/286,422 04/25/2001				
** FOREIGN APPLICATIONS *****				
IF REQUIRED, FOREIGN FILING LICENSE GRANTED** SMALL ENTITY ** ** 11/27/2001				
Foreign Priority claimed <input type="checkbox"/> yes <input type="checkbox"/> no 35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance Verified and Acknowledged _____ Examiner's Signature _____ Initials _____		STATE OR COUNTRY NY	SHEETS DRAWING 28	TOTAL CLAIMS 20
INDEPENDENT CLAIMS 3				
ADDRESS RAYMOND A. JOAO, ESQ. 122 BELLEVUE PLACE YONKERS, NY 10703				
TITLE APPARATUS AND METHOD FOR PROCESSING AND/OR FOR PROVIDING HEALTHCARE INFORMATION AND/OR HEALTHCARE-RELATED INFORMATION				
FILING FEE RECEIVED 770	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit	